

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

CLAIMS AS FILED - PART I					Application or Docket Number <i>100 39852</i>		
(Column 1) (Column 2)			SMALL ENTITY TYPE <input type="checkbox"/> OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS		<i>11</i>			RATE <input type="checkbox"/> FEE BASIC FEE <i>370.00</i>	RATE <input type="checkbox"/> FEE BASIC FEE <i>740.00</i>	
FOR		NUMBER FILED	NUMBER EXTRA			OR X\$9=	OR X\$18=
TOTAL CHARGEABLE CLAIMS		<i>11</i> minus 20 = <i>1</i>	<i>0</i>			X42=	X84=
INDEPENDENT CLAIMS		<i>3</i> minus 3 = <i>0</i>	<i>0</i>			+140=	+280=
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>					TOTAL		OR TOTAL <i>740.00</i>
* If the difference in column 1 is less than zero, enter "0" in column 2							
CLAIMS AS AMENDED - PART II					OTHER THAN SMALL ENTITY		
(Column 1) (Column 2) (Column 3)			SMALL ENTITY OR				
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/> ADDI- TIONAL FEE	RATE <input type="checkbox"/> ADDI- TIONAL FEE	
	Total	<i>11</i>	Minus <i>20</i>	<i>0</i>	X\$9=	X\$18=	
Independent	<i>3</i>	Minus <i>3</i>	<i>0</i>	X42=	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					+140=	+280=	
					TOTAL ADDIT. FEE	TOTAL ADDIT. FEE	
<i>8-24-05</i>							
(Column 1) (Column 2) (Column 3)			OTHER THAN SMALL ENTITY				
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/> ADDI- TIONAL FEE	RATE <input type="checkbox"/> ADDI- TIONAL FEE	
	Total	<i>11</i>	Minus <i>20</i>	<i>0</i>	X\$9=	X\$18=	
Independent	<i>3</i>	Minus <i>3</i>	<i>0</i>	X42=	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					+140=	+280=	
					TOTAL ADDIT. FEE	TOTAL ADDIT. FEE	
<i>8-24-05</i>							
(Column 1) (Column 2) (Column 3)			OTHER THAN SMALL ENTITY				
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/> ADDI- TIONAL FEE	RATE <input type="checkbox"/> ADDI- TIONAL FEE	
	Total	<i>11</i>	Minus <i>20</i>	<i>0</i>	X\$9=	X\$18=	
Independent	<i>3</i>	Minus <i>3</i>	<i>0</i>	X42=	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					+140=	+280=	
					TOTAL ADDIT. FEE	TOTAL ADDIT. FEE	
<ul style="list-style-type: none"> • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p>							